

Kansas Arts Jobs Grant Application

Fiscal Year 2010 (July 1, 2009 - June 30, 2010)

(Round all monies to the nearest dollar.)

Amount Requested: \$ _____

To Be Completed by KAC

Amount Funded:

\$ _____

Applicant Information

Organization Name: _____

Mailing Address: _____

City/County/State: _____

Nine-digit Zip Code: _____

Telephone: _____

Website Address: _____

Federal Employer Identification Number (FEIN): _____

State Agency Number, if applicable: _____

D.U.N.S. Number: _____

Authorizing Official Name: _____ Title: _____

(Executive director, board chairman/president or other authorizing representative)

Executive Director/Administrator: _____

Business Phone: _____ Home Phone: _____

E-mail Address: _____ Fax Number: _____

Organizational Status

1. This organization is a:

☐ Nonprofit

☐ City/County Government Agency

☐ State Agency

☐ Other: _____

2. Number of staff:

☐ paid, part-time equivalent: _____

☐ paid, full-time equivalent: _____

3. If your organization is eligible for ARRA funding directly from the National Endowment for the Arts, are you applying?

☐ Yes

☐ No